

U.S.DepartmentofHousingandUrbanDevelopment
OfficeofPublicandIndianHousing

PHAPlans

5YearPlanforFiscalYears2001 -2006

AnnualPlanforFiscalYear2002

MT.CLEMENSHOUSING COMMISSION

**NOTE: THIS PHA PLAN TEMPLATE (HUD50075) IS TO BE COMPLETED IN
ACCORDANCE WITH INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES**

**PHA Plan
Agency Identification**

PHAName :MountClemensHousingCommission

PHANumber: MI028

PHAFiscalYearBeginning:07/2002

Public Access to Information

Information regarding any activities outlined in this plan can be obtained by contacting: (select all that apply)

- ☒ Main administrative office of the PHA
50 Church Street, Mt. Clemens, Michigan 48043
- ☐ PHA development management offices
- ☐ PHA local offices
- ☒ Other (list below)
One Crocker Blvd., Mt. Clemens, Michigan 48043

Display Locations For PHA Plans and Supporting Documents

The PHA Plans (including attachments) are available for public inspection at: (select all that apply)

- ☒ Main administrative office of the PHA
- ☐ PHA development management offices
- ☐ PHA local offices
- ☒ Main administrative office of the local government
One Crocker Blvd., Mt. Clemens, MI 48043
- ☐ Main administrative office of the County government
- ☐ Main administrative office of the State government
- ☐ Public library
- ☐ PHA website
- ☒ Other (list below)
One Crocker Blvd., Mt. Clemens, Michigan 48043

PHA Plan Supporting Documents are available for inspection at: (select all that apply)

- ☒ Main business office of the PHA
50 Church Street, Mt. Clemens, Michigan
- ☐ PHA development management offices
- ☒ Other (list below)
One Crocker Blvd., Mt. Clemens, MI 48043

5-YEAR PLAN
PHAF ISCAL YEARS 2001 -2006
[24CFRPart903.5]

A.Mission

State the PHA's mission for serving the needs of low-income, very low income, and extremely low-income families in the PHA's jurisdiction. (select one of the choices below)

- ☐ The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.
- ☒ The PHA's mission is: (state mission here)

The mission of the Mt. Clemens Housing Commission is to be the leader in making excellent affordable housing available for low and moderate-income persons through effective management and wise stewardship of public funds. We will also partner with our residents and others to enhance the quality of life in our communities.

B.Goals

The goals and objectives listed below are derived from HUD's strategic Goals and Objectives and those emphasized in recent legislation. PHA may select any of these goals and objectives as their own, or identify other goals and/or objectives. Whether selecting the HUD-suggested objectives or their own, **PHAS ARE STRONGLY ENCOURAGED TO IDENTIFY QUANTIFIABLE MEASURES OF SUCCESS IN REACHING THEIR OBJECTIVES OVER THE COURSE OF THE 5 YEARS.** (Quantifiable measures would include target sets such as: numbers of families served or PHAS scores achieved.) PHA should identify these measures in the space to the right of or below the stated objectives.

HUD Strategic Goal: Increase the availability of decent, safe, and affordable housing.

- ☐ PHA Goal: Expand the supply of assisted housing
Objectives:
- ☐ Apply for additional rental vouchers:
 - ☒ **Reduce public housing vacancies**
 - ☐ Leverage private or other public funds to create additional housing opportunities:
 - ☐ Acquire or build units or developments
 - ☒ Other (list below)
- Increase customer satisfaction**
Renovate or modernize public housing units
- PHA Goal: Improve the quality of assisted housing
Objectives:
- ☐ Improve public housing management: (PHAS score)
 - ☐ Improve voucher management: (SEMAP score)

- ☐ Increase customer satisfaction:
- ☐ Concentrate on efforts to improve specific management functions:
(list; e.g., public housing finance; voucher unit inspections)
- ☐ Renovate or modernize public housing units:
- ☐ Demolish or dispose of obsolete public housing:
- ☐ Provide replacement public housing:
- ☐ Provide replacement vouchers:
- ☐ Other: (list below)

- ☐ PHA Goal: Increase assisted housing choices
- Objectives:
- ☐ Provide voucher mobility counseling:
 - ☐ Conduct outreach efforts to potential voucher landlords
 - ☐ Increase voucher payment standards
 - ☐ Implement voucher homeownership program:
 - ☐ Implement public housing or other homeownership programs:
 - ☐ Implement public housing site-based waiting lists:
 - ☐ Convert public housing to vouchers:
 - ☐ Other: (list below)

HUD Strategic Goal: Improve community quality of life and economic vitality

- ☒ PHA Goal: Provide an improved living environment
- Objectives:
- ☒ Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments:
 - ☐ Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:
 - ☐ Implement public housing security improvements:
 - ☐ Designate developments or buildings for particular resident groups (elderly, persons with disabilities)
 - ☐ Other: (list below)

HUD Strategic Goal: Promote self-sufficiency and asset development of families and individuals

- ☒ PHA Goal: Promote self-sufficiency and asset development of assisted households
- Objectives:

- ☒ Increase the number and percentage of employed persons in assisted families:
- ☐ Provide or attract supportive services to improve assistance recipients' employability:
- ☐ Provide or attract supportive services to increase independence for the elderly or families with disabilities.
- ☐ Other: (list below)

HUD Strategic Goal: Ensure Equal Opportunity in Housing for all Americans

- ☒ PHA Goal: Ensure equal opportunity and affirmatively further fair housing
Objectives:
 - ☒ Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion, national origin, sex, familial status, and disability:
 - ☐ Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion, national origin, sex, familial status, and disability:
 - ☐ Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required:
 - ☐ Other: (list below)

Other PHA Goals and Objectives: (list below)

**Annual PHA Plan and
PHA Fiscal Year 2002**
[24CFR Part 903.7]

i. Annual Plan Type:

Select which type of Annual Plan the PHA will submit.

☒ **Standard Plan**

Streamlined Plan:

- ☐ **High Performing PHA**
☐ **Small Agency (<250 Public Housing Units)**
☐ **Administering Section 8 Only**

☐ **Troubled Agency Plan**

ii. Executive Summary of the Annual PHA Plan

[24CFR Part 903.79(r)]

Provide a brief overview of the information in the Annual Plan, including highlights of major initiatives and discretionary policies the PHA has included in the Annual Plan.

EXECUTIVESUMMARY

The Mount Clemens Housing Commission has prepared this Agency Plan in compliance with Section 511 of the Quality Housing and Work Responsibility Act of 1998 and the ensuing HUD requirements.

The Mission Statement presented in this plan was developed by the Mt. Clemens Housing Commission and formerly adopted and is reflective of the goals of this Housing Commission. Our Annual Plan is based on the premise that if we accomplish our goals and objectives, we will be working toward the achievement of our mission.

The plans, statements, budget summary, policies, etc. set forth in the Annual Plan all lead toward the accomplishment of our goals and objectives. Taken as a whole, they outline a comprehensive approach toward our goals and objectives and are consistent with the Consolidated Plan. In summary, we are on course to maintain and improve the conditions of affordable housing in Mount Clemens, Michigan.

We have adopted the following mission statement to guide the activities of the Mount Clemens Housing Commission.

The mission of the Mount Clemens Housing Commission is to be the leader in making excellent affordable housing available for low and moderate-income persons through effective management and the wise stewardship of public funds. We also partner with our residents and others to enhance the quality of life in our communities.

We have also adopted the following goals and objectives for the next five years.

Goal One: ***Manage the Mount Clemens Housing Commission's existing public housing program in an efficient and effective manner thereby qualifying as a high performer.***

Objectives:

1. By June 30, 2002, the Mount Clemens Housing Commission shall have a waiting list of sufficient size so we can fill our public housing units within 30 days of them becoming vacant.
2. The Mount Clemens Housing Commission shall achieve and sustain an occupancy rate of 98% by June 30, 2004.
3. The Mount Clemens Housing Commission shall promote a motivating work environment with a capable and efficient team of employees to operate as a customer -friendly and fiscally prudent leader in the affordable housing industry.

Goal Two: ***Make public housing the affordable housing of choice for the very low-income residents of our community.***

Objectives:

1. The Mount Clemens Housing Commission shall achieve enhanced curb appeal for its housing developments by improving its streetscape, maintaining its landscaping, making its properties litter free and other actions by June 30, 2004.
2. The Mount Clemens Housing Commission shall achieve and maintain an average response time of 3 days in responding to routine work orders by June 30, 2003 .

Goal Three: ***Operate the Mount Clemens Housing Commission in full compliance with all Equal Opportunity laws and regulations.***

Objectives:

1. The Mount Clemens Housing Commission shall mix its public housing development populations as much as possible with respect to ethnicity, race and income.

Here are just a few highlights of our Annual Plan:

- We have adopted four local preferences: for victims of domestic violence, for individuals paying more than 50% off family income for rent, for individuals working at least 20 hours per week (seniors and people with disabilities automatically get this preference) and for individuals who live or work in Mount Clemens.
- Applicants will be selected from the waiting list by preference and in order of the date and time they applied.
- We have implemented a thorough screening policy for public housing applicants to ensure to the best of our ability that new admissions will be good neighbors. Our screening practices meet all fair -housing requirements.
- We have established a minimum rent of \$50.00

- We have established flat rents for all our developments based on 70% of fair market rents. Reduced from 80% to better facilitate Goal #3.
- In an attempt to encourage work and advancement in the workplace, we are not requiring re-certifications if a resident has an increase in income. The increase will be reported at the next regular re-certification. 1
- Our capital expenditure program for family housing will continue to use defensible space design to reinforce the Public Housing Drug Elimination Program work that is being done within our neighborhoods.
- We will continue to work with other agencies such as the Macomb County Health Department and local law enforcement agencies to bring in essential services to our neighborhoods.
- The status of the waiting list changes from year to year and this year's adjustments reflect this.

The Mount Clemens Housing Commission is committed to improving the condition of our housing and thus improving the lives of the residents we serve.

iii. Annual Plan Table of Contents

[24CFR Part 903.79(r)]

Provide a table of contents for the Annual Plan, including attachments, and a list of supporting documents available for public inspection.

Table of Contents	
	<u>Page#</u>
Annual Plan	
i. Executive Summary	1
ii. Table of Contents	3
1. Housing Needs	6
2. Financial Resources	10
3. Policies on Eligibility, Selection and Admissions	11
4. Rent Determination Policies	18
5. Capital Improvement Needs	23
6. Demolition and Disposition	30
7. Crime and Safety	38
8. Pets (Inactive for January 1 PHAs)	40
9. Civil Rights Certifications (included with PHA Plan Certifications)	42
10. Audit	42
11. Other Information	47

Attachments

Required Attachments:

- ☒ Admissions Policy for Deconcentration **(Included in Plan)**
- ☒ FY2001 Capital Fund and Program Annual Statement **(Included in Plan)**
- ☐ Most recent board-approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)

Optional Attachments:

- ☐ PHA Management Organizational Chart
- ☒ FY2001 Capital Fund Program 5 Year Action Plan
- ☐ Public Housing Drug Elimination Program (PHDEP) Plan
- ☒ Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text) **(Included in Plan)**
- ☒ Other (List below, providing each attachment name)
Pet Policy **(Included in plan)**

Supporting Documents Available for Review

Indicate which documents are available for public review by placing a mark in the "Applicable & On Display" column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
X	PHA Plan Certification of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
X	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans
X	Fair Housing Documentation: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans
X	Consolidated Plan for the jurisdiction/s in which the PHA is located (which includes the Analysis of Impediments to Fair Housing Choice (AI)) and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources;
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public Housing Deconcentration and Income Mixing Documentation: 1. PHA board certification of compliance with deconcentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/18/99 <i>Quality Housing and Work Responsibility Act Initial Guidance; Notice</i> and any further HUD guidance) and 2. Documentation of the required deconcentration and income mixing analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the methodology for setting public housing flat rents.	Annual Plan: Rent Determination
X	Schedule of flat rents of _____ for each public housing development <input type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Rent Determination
	Section 8 rent determination (payment standard) policies <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Grievance Procedures
	Section 8 informal review and hearing procedures <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD - approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs
	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs
X	Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	Annual Plan: Capital Needs
	Approved HOPEVI applications or, if more recent, approved or submitted HOPEVI Revitalization Plans or any other approved proposal for development of public housing	Annual Plan: Capital Needs
	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted	Annual Plan: Conversion of Public Housing

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
	conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act	
	Approved or submitted public housing home ownership programs/plans	Annual Plan: Homeownership
	Policies governing any Section 8 Homeownership program <input type="checkbox"/> check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency
	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
X	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)	Annual Plan: Safety and Crime Prevention
X	The most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

1. Statement of Housing Needs

[24 CFR Part 903.79(a)]

A. Housing Needs of Families in the Jurisdiction/s Served by the PHA

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Affordability	Supply	Quality	Access-ibility	Size	Location
Income ≤ 30% of AMI	3851	5	2	3	NA	2	1
Income > 30% but ≤ 50% of AMI	3261	4	2	2	NA	2	1
Income > 50% but < 80% of AMI	4387	3	2	2	NA	2	1
Elderly	3543	3	2	2	3	2	1
Families with Disabilities	3700	3	2	2	3	2	1
Race/Ethnicity	NA						

HousingNeedsofFamiliesintheJurisdiction byFamilyType							
FamilyType	Overall	Afford- ability	Supply	Quality	Access- ibility	Size	Loca- tion
Race/Ethnicity	NA						
Race/Ethnicity	NA						
Race/Ethnicity	NA						

What sources of information did the PHA use to conduct this analysis? (Check all that apply; all materials must be made available for public inspection.)

- ☒ Consolidated Plan of the Jurisdiction/s
Indicate year: 2000 - 2005 Macomb County, Michigan

B. HousingNeedsofFamiliesonthePublicHousingandSection8 Tenant-Based Assistance Waiting Lists

HousingNeedsofFamiliesontheWaitingList			
Waiting list type: (select one)			
<input type="checkbox"/> Section 8 tenant -based assistance			
<input checked="" type="checkbox"/> Public Housing			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site -Based or sub -jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	377		
Extremely low income <= 30% AMI	307	96.9%	
Very low income (> 30% but <= 50% AMI)	9	2.8%	
Low income (> 50% but < 80% AMI)	1	.3%	
Families with children	181	57.1%	
Elderly families	107	33.7%	
Families with Disabilities	29	9.2%	
Race/ethnicity	NA		
Race/ethnicity	NA		
Race/ethnicity	NA		

Housing Needsof Familiesonthe WaitingList			
Race/ethnicity	NA		
Characteristicsby BedroomSize (PublicHousing Only)			
1BR	136		
2BR	92		
3BR	64		
4BR	18		
5BR	7		
5+BR	NA		
Isthe waitingli stclosed(selectone)? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes Ifyes: Howlonghasitbeen closed(#ofmonths)? 10months DoesthePHAexpectto reopenthe listinthe PHAPlanyear? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes DoesthePHAper mitspecificcategoriesoffamiliesontothewaitinglist,evenif generallyclosed? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes			

C.StrategyforAddressingNeeds

ProvideabriefdescriptionofthePHA'sstrategyforaddressingthehousingneedsoffam iliesinthe jurisdictionandonthewaitinglist **INTHEUPCOMINGYEAR** ,andtheAgency'sreasonsfor choosingthisstrategy.

(1)Strategies

Need:Shortageofaffordablehousingforalleligiblepopulations

Strategy1.Maximizethenumberofaffordab leunitsavailabletothePHAwithin itscurrentresourcesby:

Selectallthatapply

- ☒ Employeffectivemaintenanceandmanagementpoliciestominimizethe numberofpublichousingunitsoff -line
- ☒ Reduceturnovertimefor vacatedpublichousingunits
- ☒ Reducetimetorenovatepublichousingunits
- ☒ ParticipateintheConsolidatedPlandevelopmentprocesstoensure coordinationwithbroadercommunitystrategies

Strategy2:Increasethenumber ofaffordablehousingunitsby:

Selectallthatapply

- ☐ Applyforadditionalsection8unitsshouldtheybecomeavailable
- ☐ Leverageaffordablehousingresourcesinthecommunitythroughthecreation ofmixed -financehousing
- ☐ PursuehousingresourcesotherthanpublichousingorSection8tenant -based assistance.

☐ Other:(listbelow)

Need:SpecificFamilyTypes:Familiesatorbelow30%ofmedian

Strategy1:Targetavailableassista nctofamiliesatorbelow30%ofAMI

Selectallthatapply

- ☒ ExceedHUDfederaltargetingrequirementsforfamiliesatorbelow30%of AMIinpublichousing
- ☒ Employadmissionspreferencesaimedatfamilieswitheconomic hardships
- ☒ Adoptrentpoliciestosupportandencouragework

Need:SpecificFamilyTypes:Familiesatorbelow50%ofmedian

Strategy1:Targetavailableassistanceto familiesatorbelow50%ofAMI

Selectallthatapply

- ☒ Employadmissionspreferencesaimedatfamilieswhoareworking
- ☒ Adoptrentpoliciestosupportandencouragework

Need:SpecificFamilyTypes:TheElderly

Strategy1: Targetavailableassistancetotheelderly:

Selectallthat apply

- ☐ Seekdesignationofpublichousingfortheelderly
- ☐ Applyforspecial -purposevoucherstargetedtotheelderly,shouldtheybecome available
- ☐ Other:(listbelow)

Need:SpecificFamilyTypes:FamilieswithDisabilities

Strategy1: TargetavailableassistancetoFamilieswithDisabilities:

Selectallthatapply

- ☒ Affirmativelymarkettolocalnon -profitagenciesthatassistfamilieswith disabilities
- ☐ Other:(listbelow)

Need:SpecificFamilyTypes:Racesorethnicitieswithdisproportionatehousing needs

Strategy1:IncreaseawarenessofPHAresourcesamongfamiliesofracesand ethnicitieswithdisproportionateneeds:

Selectifapplicable

- ☒ Affirmativelymarkettoraces/ethnicitiesshowntohavedisproportionate housingneeds
- ☐ Other:(listbelow)

Strategy2:Conductactivitiestoaffirmativelyfurtherfairhousing

Selectallthatapply

- ☐ Counsel section 8 tenants to location of units outside of areas of poverty or minority concentration and assist them to locate those units
- ☐ Market the section 8 program to owners outside of areas of poverty/minority concentrations

Other Housing Needs & Strategies: (list needs and strategies below)

(2) Reasons for Selecting Strategies

Of the factors listed below, select all that influenced the PHA's selection of the strategies it will pursue:

- ☒ Funding constraints
- ☒ Staffing constraints
- ☐ Extent to which particular housing needs are met by other organizations in the community
- ☒ Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA
- ☐ Influence of the housing market on PHA programs
- ☐ Community priorities regarding housing assistance
- ☒ Results of consultation with local or state government
- ☒ Results of consultation with residents and the Resident Advisory Board
- ☒ Results of consultation with advocacy groups
- ☐ Other: (list below)

2. Statement of Financial Resources

[24CFR Part 903.79(b)]

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
1. Federal Grants (FY 2001 grants)		
a) Public Housing Operating Fund	568,164	
b) Public Housing Capital Fund	546,782	
c) HOPE VI Revitalization	NA	
d) HOPE VI Demolition	NA	
e) Annual Contributions for Section 8 Tenant -Based Assistance	NA	
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)	70,759	
g) Resident Opportunity and Self - Sufficiency Grants	NA	
h) Community Development Block Grant	NA	
i) HOME	NA	

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
Other Federal Grants (list below)		
2. Prior Year Federal Grants (unobligated funds only) (list below)		
CGP	557,868	Capital Improvements
3. Public Housing Dwelling Rental Income	582,000	Operations
4. Other income (list below)		
Laundry/late fees	9,000	Operations
4. Non-federal sources (list below)		
Investment income	12,000	Operations
Total resources	1,160,868	

3. PHA Policies Governing Eligibility, Selection, and Admissions

[24CFR Part 903.79(c)]

A. Public Housing

(1) Eligibility

- a. When does the PHA verify eligibility for admission to public housing?
☒ When families are within a certain time of being offered a unit: (**5-30 days**)
- b. Which non-income (screening) factors does the PHA use to establish eligibility for admission to public housing?
☒ Criminal or Drug-related activity
☒ Rental history
☒ Housekeeping
- c. ☒ Yes ☐ No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?
- d. ☐ Yes ☒ No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?
- e. ☐ Yes ☒ No: Does the PHA access FBI criminal records from the FBI for screening purposes? (Either directly or through an NCIC - authorized source)

(2) Waiting List Organization

- a. Which methods does the PHA plan to use to organize its public housing waiting list?
☒ Community-wide list
- b. Where may interested persons apply for admission to public housing?
☒ PHA main administrative office

(3) Assignment

a. How many vacant unit choices are applicants ordinarily given before they fall to the bottom of or are removed from the waiting list? (Select one)

- ☐ One
☐ Two
☒ Three or More

b. ☒ Yes ☐ No: Is this policy consistent across all waiting list types?

(4) Admissions Preferences

a. Income targeting:

☒ Yes ☐ No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 40% of all new admission to public housing to families at or below 30% of median area income?

b. Transfer policies:

In what circumstances will transfer take precedence over new admissions? (list below)

☒ Emergencies

c. Preferences

1. ☒ Yes ☐ No: Has the PHA established preferences for admission to public housing (other than date and time of application)? (If "no" is selected, skip to subsection **(5) Occupancy**)

2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)

Former Federal preferences:

- ☒ Victims of domestic violence
☒ High rent burden (rent is > 50 percent of income)

Other preferences: (select below)

- ☒ Working families and those unable to work because of age or disability
☒ Residents who live and/or work in the jurisdiction

3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that represents your first priority, a "2" in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a points system), place the same number next to each. That means you can use "1" more than once, "2" more than once, etc.

1 Date and Time

Former Federal preferences:

Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)

- 2 Victims of domestic violence
Substandard housing
Homelessness
- 2 High rent burden

Other preferences (select all that apply)

- ☒ Working families and those unable to work because of age or disability
- ☐ Veterans and veterans' families
- ☒ Residents who live and/or work in the jurisdiction
- ☒ Those enrolled currently in educational, training, or upward mobility programs
- ☐ Households that contribute to meeting income goals (broad range of incomes)
- ☐ Households that contribute to meeting income requirements (targeting)
- ☐ Those previously enrolled in educational, training, or upward mobility programs
- ☐ Victims of reprisals or hate crimes
- ☐ Other preference(s) (list below)

4. Relationship of preferences to income targeting requirements:

- ☐ The PHA applies preferences within income tiers
- ☒ Not applicable: the pool of applicant families ensures that the PHA will meet income-targeting requirements

(5) Occupancy

a. What reference materials can applicants and residents use to obtain information about the rules of occupancy of public housing (select all that apply)

- ☒ The PHA - resident lease
- ☒ The PHA's Admissions and (Continued) Occupancy policy
- ☒ PHA briefing seminars or written materials
- ☐ Other source (list)

b. How often must residents notify the PHA of changes in family composition? (Select all that apply)

- ☐ At an annual reexamination and lease renewal
- ☒ Anytime family composition changes
- ☐ At family request for revision
- ☐ Other (list)

(6) Deconcentration and Income Mixing

- a. ☒ Yes ☐ No: Did the PHA's analysis of its family (general occupancy) developments to determine concentrations of poverty indicate the need for measures to promote deconcentration of poverty or income mixing?

b. ☒ Yes ☐ No: Did the PHA adopt any changes to its **admissions policies** based on the results of the required analysis of the need to promote deconcentration of poverty or to assure income mixing?

c. If the answer to b was yes, what changes were adopted? (select all that apply)

- ☐ Adoption of site-based waiting lists
If selected, list targeted developments below:
- ☐ Employing waiting list "skipping" to achieve deconcentration of poverty or income mixing goals at targeted developments
If selected, list targeted developments below:
- ☐ Employing new admission preferences at targeted developments
If selected, list targeted developments below:
- ☒ Other (list policies and developments targeted below)

Preference for working families

Establishing flat rents

d. ☒ Yes ☐ No: Did the PHA adopt any changes to **other** policies based on the results of the required analysis of the need for deconcentration of poverty and income mixing?

e. If the answer to d was yes, how would you describe these changes? (select all that apply)

- ☐ Additional affirmative marketing
- ☒ Actions to improve the marketability of certain developments
- ☐ Adoption or adjustment of ceiling rents for certain developments
- ☐ Adoption of rent incentives to encourage deconcentration of poverty and income-mixing
- ☐ Other (list below)

f. Based on the results of the required analysis, in which developments will the PHA make special efforts to attract or retain higher -income families? (select all that apply)

- ☒ Not applicable: results of analysis did not indicate a need for such efforts
- ☐ List (any applicable) developments below:

g. Based on the results of the required analysis, in which developments will the PHA make special efforts to assure access for lower -income families? (select all that apply)

- ☒ Not applicable: results of analysis did not indicate a need for such efforts
- ☐ List (any applicable) developments below:

B. Section 8

(1) Eligibility

a. What is the extent of screening conducted by the PHA? (select all that apply)

- ☐ Criminal or drug -related activity only to the extent required by law or regulation
- ☐ Criminal and drug -related activity, more extensively than required by law or regulation

- ☐ More general screening than criminal and drug -related activity (list factors below)
- ☐ Other (list below)

b. ☐ Yes ☐ No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?

c. ☐ Yes ☐ No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?

d. ☐ Yes ☐ No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC - authorized source)

e. Indicate what kinds of information you share with prospective landlords? (select all that apply)

- ☐ Criminal or drug -related activity
- ☐ Other (describe below)

(2) Waiting List Organization

a. With which of the following program waiting lists is the section 8 tenant -based assistance waiting list merged? (select all that apply)

- ☐ None
- ☐ Federal public housing
- ☐ Federal moderate rehabilitation
- ☐ Federal project -based certificate program
- ☐ Other federal or local program (list below)

b. Where may interested persons apply for admission to section 8 tenant -based assistance? (select all that apply)

- ☐ PHA main administrative office
- ☐ Other (list below)

(3) Search Time

a. ☐ Yes ☐ No: Does the PHA give extensions on standard 60 -day period to search for a unit?

If yes, state circumstances below:

(4) Admissions Preferences

a. Income targeting

☐ Yes ☐ No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 75% of all new admissions to the section 8 program to families at or below 30% of median area income?

b. Preferences

1. ☐ Yes ☐ No: Has the PHA established preferences for admission to section 8 tenant-based assistance? (other than date and time of application) (if no, skip to subcomponent **(5) Special purpose section 8 assistance programs**)

2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)

Former Federal preferences

- ☐ Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- ☐ Victims of domestic violence
- ☐ Substandard housing
- ☐ Homelessness
- ☐ High rent burden (rent is > 50 percent of income)

Other preferences (select all that apply)

- ☐ Working families and those unable to work because of age or disability
- ☐ Veterans and veterans' families
- ☐ Residents who live and/or work in your jurisdiction
- ☐ Those enrolled currently in educational, training, or upward mobility programs
- ☐ Households that contribute to meeting income goals (broad range of incomes)
- ☐ Households that contribute to meeting income requirements (targeting)
- ☐ Those previously enrolled in educational, training, or upward mobility programs
- ☐ Victims of reprisals or hate crimes
- ☐ Other preference(s) (list below)

3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that represents your first priority, a "2" in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a points system), place the same number next to each. That means you can use "1" more than once, "2" more than once, etc.

Date and Time

Former Federal preferences

Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
Victims of domestic violence

Substandard housing
Homelessness
High rent burden

Other preferences (select all that apply)

- ☐ Working families and those unable to work because of age or disability
- ☐ Veterans and veterans' families
- ☐ Residents who live and/or work in your jurisdiction
- ☐ Those enrolled currently in educational, training, or upward mobility programs
- ☐ Household that contributes to meeting income goals (broad range of incomes)
- ☐ Household that contributes to meeting income requirements (targeting)
- ☐ Those previously enrolled in educational, training, or upward mobility programs
- ☐ Victims of reprisals or hate crimes
- ☐ Other preference(s) (list below)

4. Among applicants on the waiting list with the equal preference status, how are applicants selected? (select one)

- ☐ Date and time of application
- ☐ Drawing (lottery) or other random choice technique

5. If the PHA plans to employ preferences for "residents who live and/or work in the jurisdiction" (select one)

- ☐ This preference has previously been reviewed and approved by HUD
- ☐ The PHA requests approval for this preference through this PHA Plan

6. Relationship of preference to income targeting requirements: (select one)

- ☐ The PHA applies preferences within income tiers
- ☐ Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

(5) Special Purpose Section 8 Assistance Programs

a. In which documents or other reference materials are the policies governing eligibility, selection, and admission to any special purpose section 8 program administered by the PHA contained? (select all that apply)

- ☐ The Section 8 Administrative Plan
- ☐ Briefing sessions and written materials
- ☐ Other (list below)

b. How does the PHA announce the availability of any special purpose section 8 programs to the public?

- ☐ Through published notices
- ☐ Other (list below)

4.PHARentDeterminationPolicies

[24CFRPart903.79(d)]

A.PublicHousing

Exemptions:PHAsthatdonotadministerpublichousingarenotrequiredto completesub -component
4A.

(1)IncomeBasedRentPolicies

Describe the PHA's income based rent setting policy/ies for public housing using, including discretionary (that is, not required by statute or regulation) income disregards and exclusions, in the appropriate space below.

a. Use of discretionary policies: (select one)

- ☒ The PHA employs discretionary policies for determining income based rent (If selected, continue to question b.)

b. Minimum Rent

1. What amount best reflects the PHA's minimum rent? (select one)

- ☐ \$0
☐ \$1-\$25
☒ \$26-\$50

2. ☒ Yes ☐ No: Has the PHA adopted any discretionary minimum rent hardship exemption policies?

3. If yes to question 2, list these policies below :

1. **When the family has lost eligibility for or is waiting an eligibility determination for a federal, state or local assistance programs .**
2. **When the family would be evicted as a result of the imposition of the minimum rent.**
3. **When the income of the family has decreased because of changed circumstances, including loss of employment.**
4. **When the family has an increase in expenses because of changed circumstances for medical costs, child care, transportation, education or similar items.**
5. **When a death has occurred in the family.**

c. Rents set at less than 30% than adjusted income

1. ☐ Yes ☒ No: Does the PHA plan to charge rents at a fixed amount or percentage less than 30% of adjusted income?

2. If yes to above, list the amounts or percentages charged and the circumstances under which these will be used below:

d. Which of the discretionary (optional) deductions and/or exclusions policies does the PHA plan to employ (select all that apply)

- ☒ For the earned income of a previously unemployed household member

- ☐ For increase in earned income
- ☐ Fixed amount (other than general rent -setting policy)
If yes, state amount/s and circumstances below:
- ☐ Fixed percentage (other than general rent -setting policy)
If yes, state percentage/s and circumstances below:
- ☐ For household heads
- ☐ For other family members
- ☐ For transportation expenses
- ☐ For the non -reimbursed medical expenses of non -disabled or non -elderly families
- ☐ Other (describe below)

e. Ceiling rents

1. Do you have ceiling rents? (rents set at a level lower than 30% of adjusted income)
(select one)

- ☒ Yes for all developments
- ☐ Yes but only for some developments
- ☐ No

2. For which kinds of developments are ceiling rents in place? (select all that apply)

- ☒ For all developments
- ☒ For all general occupancy developments (not elderly or disabled or elderly only)
- ☐ For specified general occupancy developments
- ☐ For certain parts of developments; e.g., the high -rise portion
- ☐ For certain size units; e.g., larger bedroom sizes
- ☐ Other (list below)

3. Select the space or spaces that best describe how you arrive at ceiling rents (select all that apply)

- ☒ Market comparability study
- ☒ Fair market rents (FMR)
- ☐ 95th percentile rents
- ☐ 75 percent of operating costs
- ☐ 100 percent of operating costs for general occupancy (family) developments
- ☐ Operating costs plus debt service
- ☐ The "rental value" of the unit
- ☐ Other (list below)

f. Rent re -determinations:

1. Between income reexaminations, how often must tenants report changes in income or family composition to the PHA such that the changes result in an adjustment to rent? (select all that apply)

- ☒ Never

- ☐ At family option
- ☐ Anytime the family experiences an income increase
- ☐ Anytime a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold) _____
- ☐ Other (list below)

g. ☐ Yes ☒ No: Does the PHA plan to implement individual savings accounts for residents (ISAs) as an alternative to the required 12 month disallowance of earned income and phasing in of rent increases in the next year?

(2) Flat Rents

1. In setting the market -based flat rents, what sources of information did the PHA use to establish comparability? (select all that apply.)
 - ☒ This section 8 rent reasonableness study of comparable housing
 - ☐ Survey of rents listed in local newspaper
 - ☐ Survey of similar unassisted units in the neighborhood
 - ☐ Other (list/describe below)

B. Section 8 Tenant-Based Assistance

Exemptions: PHAs that do not administer Section 8 tenant -based assistance are not required to complete sub -component 4B. **Unless otherwise specified, all questions in this section apply only to the tenant -based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).**

(1) Payment Standards

Describe the voucher payment standards and policies .

a. What is the PHA's payment standard? (select the category that best describes your standard)

- ☐ At or above 90% but below 100% of FMR
- ☐ 100% of FMR
- ☐ Above 100% but at or below 110% of FMR
- ☐ Above 110% of FMR (if HUD approved; describe circumstances below)

b. If the payment standard is lower than FMR, why has the PHA selected this standard? (select all that apply)

- ☐ FMRs are adequate to ensure success among assisted families in the PHA's segment of the FMR area
- ☐ The PHA has chosen to serve additional families by lowering the payment standard
- ☐ Reflects market or submarket
- ☐ Other (list below)

c. If the payment standard is higher than FMR, why has the PHA chosen this level? (select all that apply)

- ☐ FMRs are not adequate to ensure success among assisted families in the PHA's segment of the FMR area

- ☐ Reflects market or submarket
- ☐ To increase housing options for families
- ☐ Other (list below)

d. How often are payment standards reevaluated for adequacy? (select one)

- ☐ Annually
- ☐ Other (list below)

e. What factors will the PHA consider in its assessment of the adequacy of its payment standard? (select all that apply)

- ☐ Success rates of assisted families
- ☐ Rent burden of assisted families
- ☐ Other (list below)

(2) Minimum Rent

a. What amount best reflects the PHA's minimum rent? (select one)

- ☐ \$0
- ☐ \$1-\$25
- ☐ \$26-\$50

b. ☐ Yes ☐ No: Has the PHA adopted any discretionary minimum rent hardship exemption policies? (if yes, list below)

5. Operations and Management

[24CFR Part 903.79(e)]

Exemptions from Component 5: High performing and small PHAs are not required to complete this section. Section 8 only PHAs must complete parts A, B, and C (2)

A. PHA Management Structure

Describe the PHA's management structure and organization.

(Select one)

- ☐ An organization chart showing the PHA's management structure and organization is attached.
- ☒ A brief description of the management structure and organization of the PHA follows:

Director, housing manager, administrative assistant, bookkeeper and our Maintenance positions along with Modernization consultant part time.

B. HUD Programs Under PHA Management

List Federal programs administered by the PHA, number of families served at the beginning of the upcoming fiscal year, and expected turnover in each. (Use "NA" to indicate that the PHA does not operate any of the programs listed below.)

Program Name	Units or Families Served at Year Beginning	Expected Turnover
Public Housing	288	40
Section 8 Vouchers	NA	
Section 8 Certificates	NA	
Section 8 Mod Rehab	NA	
Special Purpose Section 8 Certificates/Vouchers (list individually)	NA	
Public Housing Drug Elimination Program (PHDEP)	194	
Other Federal Programs (list individually)		

C. Management and Maintenance Policies

List the PHA's public housing management and maintenance policy documents, manuals and handbooks that contain the Agency's rules, standards, and policies that govern maintenance and management of public housing, including a description of any measures necessary for the prevention or eradication of pest infestation (which includes cockroach infestation) and the policies governing Section 8 management.

(1) Public Housing Maintenance and Management: (list below)

- Admissions and Continued Occupancy Policy
- Drug Free Workplace Policy
- Equal Opportunity Policies
- Maintenance Policy
- Personnel Policies
- Procurement Policy
- Travel Policy

(2) Section 8 Management: (list below)

NA

6. PHA Grievance Procedures

[24 CFR Part 903.79(f)]

A. Public Housing

1. ☐ Yes ☒ No: Has the PHA established any written grievance procedures in addition to federal requirements found at 24 CFR Part 966, Subpart B, for residents of public housing?

If yes, list additions to federal requirements below:

2. Which PHA offices should residents or applicants to public housing contact to initiate the PHA grievance process? (select all that apply)

- ☒ PHA main administrative office
☐ PHA development management offices
☐ Other (list below)

B. Section 8 Tenant -Based Assistance

1. ☐ Yes ☐ No: Has the PHA established informal review procedures for applicants to the Section 8 tenant -based assistance program and informal hearing procedures for families assisted by the Section 8 tenant -based assistance program in addition to federal requirements found at 24 CFR 982?

If yes, list additions to federal requirements below:

2. Which PHA offices should applicants or assisted families contact to initiate the informal review and informal hearing processes? (select all that apply)

- ☐ PHA main administrative office
☐ Other (list below)

7. Capital Improvement Needs

[24 CFR Part 903.79(g)]

A. Capital Fund Activities

Exemptions from sub -component 7A: PHA that will not participate in the Capital Fund Program may skip to component 7B. All other PHAs must complete 7A as instructed.

(1) Capital Fund Program Annual Statement

Using parts I, II, and III of the Annual Statement for the Capital Fund Program (CFP), identify capital activities the PHA is proposing for the upcoming year to ensure long -term physical and social viability of its public housing developments. This statement can be completed by using the CFP Annual Statement tables provided in the table library at the end of the PHA Plan template **OR**, at the PHA's option, by completing and attaching a properly updated HUD -52837.

Select one:

- ☐ The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan as Attachment (state name)

-or-

- ☒ The Capital Fund Program Annual Statement is provided below: (if selected, copy the CFP Annual Statement from the Table Library and insert there)

**PHA Plan
Table Library
Component 7
Capital Fund Program Annual Statement
Parts I, II, and III**

**Annual Statement
Capital Fund Program (CFP) Part I: Summary**

Capital Fund Grant Number MI28P02850101FFY of Grant Approval: 2001

☐ Revised Annual Statement

Line No.	Summary by Development Account	Total Estimated Cost
1	Total Non -CGP Funds	
2	1406 Operations	
3	1408 Management Improvements	12,500
4	1410 Administration	50,000
5	1411 Audit	
6	1415 Liquidated Damages	
7	1430 Fees and Costs	38,000
8	1440 Site Acquisition	
9	1450 Site Improvement	310,000
10	1460 Dwelling Structures	144,000
11	1465.1 Dwelling Equipment -Nonexpendable	3,368
12	1470 Nondwelling Structures	
13	1475 Nondwelling Equipment	
14	1485 Demolition	
15	1490 Replacement Reserve	
16	1492 Moving to Work Demonstration	
17	1495.1 Relocation Costs	
18	1498 Mod Used for Development	
19	1502 Contingency	
20	Amount of Annual Grant (Sum of lines 2 -19)	557,868
21	Amount of line 20 Related to LBP Activities	
22	Amount of line 20 Related to Section 504 Compliance	
23	Amount of line 20 Related to Security	
24	Amount of line 20 Related to Energy Conservation Measures	

AnnualStatement
CapitalFundProgram(CFP)PartII:SupportingTable

DevelopmentNumber/Name HA-WideActivities	GeneralDescriptionofMajorWork Categories	Development AccountNumber	Total Estimated Cost
HAWide	Managementimprovements:	1408	12,500
	Administration	1410	50,000
	ArchitecturalandEngineer ing	1430	38,000
	Non-DwellingEquipment	1465.1	3,368
	SubTotalHAWide		103,868
	MI28-1ClemensHomes		
	SiteWork	1450	10,000
	DwellingStructures	1460	20,000
	SubTotalMI28 -1		30,000
	MI2-2ClemensHomes		
MI28-1	SiteWork	1450	300,000
	DwellingStr uctures	1460	50,000
	SubTotalMI28 -2		350,000
	MI28-3ClemensTowers		
	DwellingStructures	1460	35,000
	SubTotalMI28 -3		35,000
	MI28-4ClemensManor		
	DwellingStructures	1460	39,000
	SubTotalMI28 -4		39,000
	SubTotal(PhysicalImprovem ents)		454,000
	GrandTotal		557,868
MI28-1	<u>Siteimprovements</u> Completesiteworkbeguninprevious phase.Overallworkcontractforthe following...Replaceexistingconcrete sidewalk/paving/paths/patios;concrete& curbingremoval&Replacement;remo ve blockwallindryingyards;installclothes lines;installdumpsterscreenwalls& pads;asphaltresurfacing;newasphalt pavingasneeded;selecttreeremoval& siteclearing;demolisheexistingdrying yardandreplaceconcretepads& constructnewstor ageunits;remove& replacesanitaryleadstomains;replace damagedfrontstoops;landscaping allowanceperunit;siteutilities -electrical; demolishoverheadsystem;remove masts/patchroofs;newpoles;newUBG feederstoexistingmeterboxes;site pedestrianlightingandpatchrepair.	1450	10,000

MI28-2	<u>DwellingStructure</u> Beginreplacementofvinyltilefloors. Initiateconstructofcantileveredcloset replacement;begininventoryatrelated buildingsandre -shingleroofs. SubTotal	1460	20,000
			30,000
MI28-3	<u>Siteimprovements</u> Completesiteworkbeguninprevious phase.Overallworkcontractforthe following... Replaceexistingconcretesidewalk/ paving/paths/patios;Concrete&curbing removal&Replacement;removeblock wallindryingyards;asp haltresurfacing; newasphaltpaving;selecttreeremoval& siteclearing;demolishexistingdrying yardandreplaceconcretepads& constructnewstorageunits;remove& replacesanitaryleadstomains;replace damagedfrontstoops;landscaping allowance perunit;siteutilities -electrical; demolishoverheadsystem;remove masts/patchroofs;newpoles;newUG feederstoexistingmeterboxes;site pedestrianlightingandpatchrepair. <u>DwellingStructure</u> Beginreplacementofcantilevered closets;re -shingleroofs;newclosetdoors SubTotal	1450	300,000
		1460	50,000
MI28-4			350,000
	<u>DwellingStructure</u> Replaceapartmentcarpetinginselected units;initiatere -glazing/replacementof faultywindows. SubTotal	1460	35,000
MI28-4			35,000
	<u>DwellingStructure</u> Replacecarpetinginselectedunitsandin commonareas;improverearenceto 3buildings. SubTotal	1460	39,000
			39,000

Annual Statement
Capital Fund Program (CFP) Part III: Implementation Schedule

Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)	All Funds Expended (Quarter Ending Date)
	3/31/03	9/30/05

(2) Optional 5 - Year Action Plan

Agencies are encouraged to include a 5 - Year Action Plan covering capital work items. This statement can be completed by using the 5 Year Action Plan table provided in the table library at the end of the PHA Plan template **OR** by completing and attaching a properly updated HUD -52834.

a. ☒ Yes ☐ No: Is the PHA providing an optional 5 - Year Action Plan for the Capital Fund? (if no, skip to sub -component 7B)

b. If yes to question a, select one:

☐ The Capital Fund Program 5 - Year Action Plan is provided as an attachment to the PHA Plan as Attachment (state name

-or-

☒ The Capital Fund Program 5 - Year Action Plan is provided below: (if selected, copy the CFP optional 5 - Year Action Plan from the Table Library and insert here)

Optional Table for 5 - Year Action Plan for Capital Fund (Component 7)

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA -wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5 - Year cycle, because this information is included in the Capital Fund Program Annual Statement.

Optional 5 - Year Action Plan Tables			
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development
MI28 -1	Clemens Homes	7 units	7%
Description of Needed Physical Improvements or Management Improvements		Estimated Cost	Planned Start Date (HA Fiscal Year)
Fiscal Year Commencing July 1, 2002 through June			

31,2005		
1.Paintunits,interiorandexterior	62,500	2003
2.Newroofing	82,500	2003
3.Closetdoorreplacement	28,800	2003
4.Paintunits,interiorandexterior	62,500	2004
5.Newroofing	82,500	2004
6.Closetdoorreplacement	28,800	2004
7.Paintunits,interiorandexterior	60,000	2005
8.Newroofing	79,200	2005
9.Firstfloortilereplacement	30,000	2005
10.Paintunits,interiorandexterior	60,000	2006
11.Newroofing	79,200	2006
12.Firstfloortilereplacement	30,000	2006
Totalestimatedcostovernext5years	\$686,000	

Optional5 -YearActionPlanTables			
Development Number	DevelopmentName (orindicatePHAwide)	Number Vacant Units	% Vacancies inDevelopment
MI28-2	ClemensHomes	4units	6%
DescriptionofNeededPhysicalImprovementsor ManagementImprovements		EstimatedCost	PlannedStartDate (HAFiscalYear)
FiscalYearCommencingJuly1,2001ThroughJune 31,2005			
Paintunits,interiorandexterior		37,500	2003
Replacefirstfloortile		18,000	2003
Paintunits,interiorandexterior		15,000	2003
Replacefirstfloortile		18,200	2004
Paintunits,interiorandexterior		37,500	2005
Replacefirstfloortile		18,000	2005
Paintunits,interiorandexterior		37,500	2005
Replacefirstfloortile		18,000	2006
Totalestimatedcostovernext5years		\$199,700	

Optional5 -YearActionPlanTables			
Development Number	DevelopmentName (orindicatePHAwide)	Number VacantUnits	% Vacancies inDevelopment
MI28-3	ClemensTowers	3units	3%
DescriptionofNeededPhysicalImprovementsor ManagementImprovements		EstimatedCost	PlannedStartDate (HAFiscalYear)
FiscalYearCommencingJuly1,2001throughJune 31,2005			
Replaceexteriordoorandframe		8,500	2003
Replaceapartmentcarpet,selectunits		37,500	2003
Resurfaceparkinglot		15,700	2004
FireEmergencyalarmpanel		190,000	2004
Beginwindowrepair/replacement		150,000	2004
Convert3unitsto504standards		30,000	2005
Windowrepair/replacement		150,000	2005
Replacecarpeting,selectunits		37,500	2006
Totalestimatedcostovernext5years		619,200	

Optional5 -YearActionPlanTables			
---------------------------------	--	--	--

Development Number	DevelopmentName (or indicate PHA wide)	#Vacant Units	% Vacancies in Development
MI28 -4	Clemens Manor	2 units	5%
Description of Needed Physical Improvements or Management Improvements		Estimated Cost	Planned Start Date (HA Fiscal Year)
Fiscal Year Commencing July 1, 2001 through June 31, 2005			
Replace apartment carpeting		60,000	2003
New roof - 1 building		24,000	2004
Replace hall carpeting		17,800	2004
New roofs - 2 buildings		48,000	2005
Site improvements		12,500	2005
Site improvements		12,500	2006
Total estimated cost over next 5 years		\$174,800	

Optional 5 - Year Action Plan Tables			
Development Number	DevelopmentName (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development
PHA Wide	PHA Wide		
Description of Needed Physical Improvements or Management Improvements		Estimated Cost	Planned Start Date (HA Fiscal Year)
Fiscal Year Commencing July 1, 2001 through June 31, 2005			
Management Improvements		12,500	2003
Administration		47,000	2003
A/E fees and costs		45,500	2003
Management Improvements		12,500	2004
Administration		47,000	2004
A/E fees and costs		45,500	2004
Management Improvements		12,500	2005
Administration		47,000	2005
A/E fees and costs		45,500	2005
Management Improvements		12,500	2006
Administration		47,000	2006
A/E fees and costs		45,500	2006
Total estimated cost over next 5 years		\$420,000	

B. HOPE VI and Public Housing Development and Replacement Activities (Non - Capital Fund)

Applicability of sub-component 7B: All PHAs administering public housing. Identify any approved HOPE VI and/or public housing development or replacement activities not described in the Capital Fund Program Annual Statement.

- ☐ Yes ☒ No: a) Has the PHA received a HOPE VI revitalization grant? (if no, skip to question c; if yes, provide responses to question b for each grant, copying and completing as many times as necessary)
- b) Status of HOPE VI revitalization grant (complete one set of questions for each grant)

1. Development name:

2. Development (project) number:

3. Status of grant: (select the statement that best describes the current status)

- ☐ Revitalization Plan under development
- ☐ Revitalization Plan submitted, pending approval
- ☐ Revitalization Plan approved
- ☐ Activities pursuant to an approved Revitalization Plan underway

- ☐ Yes ☒ No: c) Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year?

If yes, list development name/s below:

- ☐ Yes ☒ No: d) Will the PHA be engaging in any mixed -financed development activities for public housing in the Plan year?

If yes, list developments or activities below:

- ☐ Yes ☒ No: e) Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement?

If yes, list developments or activities below:

8. Demolition and Disposition

[24 CFR Part 903.79(h)]

1. ☐ Yes ☒ No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If "No", skip to component 9; if "yes", complete one activity description for each development.)

2. Activity Description

- ☐ Yes ☐ No: Has the PHA provided the activities description information in the **optional** Public Housing Asset Management Table? (If "yes", skip to component 9. If "No", complete the Activity Description table below.)

Demolition/Disposition Activity Description	
1a. Development name:	
1b. Development (project) number:	
2. Activity type: Demolition <input type="checkbox"/> Disposition <input type="checkbox"/>	
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>	
4. Date application approved, submitted, or planned for submission: (DD/MM/YY)	
5. Number of units affected:	
6. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development	
7. Timeline for activity: a. Actual or projected start date of activity: b. Projected end date of activity:	

9. Designation of Public Housing for Occupancy by Elderly Families or Families with Disabilities or Elderly Families and Families with Disabilities

[24 CFR Part 903.79(i)]

Exemptions from Component 9; Section 8 only PHAs are not required to complete this section.

1. ☒ Yes ☐ No: Has the PHA designated or applied for approval to designate or does the PHA plan to apply to designate any public housing for occupancy only by the elderly families or only by families with disabilities, or by elderly families and families with disabilities or will apply for designation for occupancy by only elderly families or only families with disabilities, or by elderly families and families with disabilities as provided by section 7 of the U.S. Housing Act of 1937 (42 U.S.C. 1437e) in the upcoming fiscal year? (If "No", skip to component 10. If "yes", complete one activity description for each development, unless the PHA is eligible to complete a streamlined submission; PHAs completing streamlined submissions may skip to component 10.)

2. Activity Description

☐ Yes ☒ No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? If "yes", skip to component 10. If "No", complete the Activity Description table below.

Designation of Public Housing Activity Description	
1a. Development name: Clemens Towers	
1b. Development (project) number: MI28P028003	
2. Designation type:	
Occupancy by only the elderly	<input checked="" type="checkbox"/>
Occupancy by families with disabilities	<input type="checkbox"/>
Occupancy by only elderly families and families with disabilities	<input type="checkbox"/>
3. Application status (select one)	
Approved; included in the PHA's Designation Plan	<input checked="" type="checkbox"/>
Submitted, pending approval	<input type="checkbox"/>
Planned application	<input type="checkbox"/>
4. Date this designation approved, submitted, or planned for submission: 1-1-1977	
5. If approved, will this designation constitute a (select one)	
<input checked="" type="checkbox"/> New Designation Plan	
<input type="checkbox"/> Revision of a previously approved Designation Plan?	
6. Number of units affected: 94	
7. Coverage of action (select one)	
<input type="checkbox"/> Part of the development	
<input checked="" type="checkbox"/> Total development	

10. Conversion of Public Housing to Tenant -Based Assistance

[24CFR Part 903.79(j)]

Exemptions from Component 10; Section 8 only PHAs are not required to complete this section.

A. Assessment of Reasonable Revitalization Pursuant to section 202 of the HUD FY1996 HUD Appropriations Act

1. ☐ Yes ☒ No: Have any of the PHA's developments or portions of developments been identified by HUD or the PHA as covered under section 202 of the HUD FY 1996 HUD Appropriations Act? (If "No", skip to component 11; if "yes", complete one activity description for each identified development, unless eligible to complete as streamlined submission. PHAs completing streamlined submissions may skip to component 11.)

2. Activity Description

- ☐ Yes ☐ No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? If "yes", skip to component 11. If "No", complete the Activity Description table below.

Conversion of Public Housing Activity Description
1a. Development name: 1b. Development (project) number:
2. What is the status of the required assessment? <input type="checkbox"/> Assessment underway <input type="checkbox"/> Assessment results submitted to HUD <input type="checkbox"/> Assessment results approved by HUD (if marked, proceed to next question) <input type="checkbox"/> Other (explain below)
3. <input type="checkbox"/> Yes <input type="checkbox"/> No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to block 5.)
4. Status of Conversion Plan (select the statement that best describes the current status) <input type="checkbox"/> Conversion Plan in development <input type="checkbox"/> Conversion Plan submitted to HUD on: (DD/MM/YYYY) <input type="checkbox"/> Conversion Plan approved by HUD on: (DD/MM/YYYY) <input type="checkbox"/> Activities pursuant to HUD - approved Conversion Plan underway
5. Description of how requirements of Section 202 are being satisfied by means other than conversion (select one) <input type="checkbox"/> Units addressed in a pending or approved demolition application (date submitted or approved:) <input type="checkbox"/> Units addressed in a pending or approved HOPE VI demolition application (date submitted or approved:) <input type="checkbox"/> Units addressed in a pending or approved HOPE VI Revitalization Plan (date submitted or approved:) <input type="checkbox"/> Requirements no longer applicable: vacancy rates are less than 10 percent <input type="checkbox"/> Requirements no longer applicable: site now has less than 300 units <input type="checkbox"/> Other: (describe below)

B. Reserved for Conversions pursuant to Section 22 of the U.S. Housing Act of 1937

C. Reserved for Conversions pursuant to Section 33 of the U.S. Housing Act of 1937

11.Homeowner shipProgramsAdministeredbythePHA

[24CFRPart903.79(k)]

A.PublicHousing

ExemptionsfromComponent11A:Section8onlyPHAsarenotrequiredtocomplete11A.

1. ☐ Yes ☒ No: DoesthePHAadministeranyhome ownershipprograms administeredbythePHAunderanapprovedsection5(h) homeownershipprogram(42U.S.C.1437c(h)),oranapproved HOPE Iprogram(42U.S.C.1437aaa)orhasthePHAapplied orplantoapplytoadministeranyhomeownershipprograms unders ection5(h),theHOPEIprogram,orsection32ofthe U.S.HousingActof1937(42U.S.C.1437z -4).(If“No”,skip tocomponent11B;if“yes”,completeoneactivitydescription foreachapplicableprogram/plan,unlesseligibletocompletea streamlined submissiondueto **smallPHA** or **highperforming PHA**status.PHAScompletingstreamlinedsubmissionsmay skiptocomponent11B.)

2.ActivityDescription

- ☐ Yes ☐ No: HasthePHAprovidedallrequiredactivitydescription informationforthiscomponentinthe **optional**PublicHousing AssetManagementTable?(If“yes”,skiptocomponent12.If “No”,completetheActivityDescriptiontablebelow.)

PublicHousingHomeownershipActivityDescription (Completeoneforeachdevel opmentaffected)
1a.Developmentname: 1b.Development(project)number:
2.FederalProgramauthority: <input type="checkbox"/> HOPEI <input type="checkbox"/> 5(h) <input type="checkbox"/> TurnkeyIII <input type="checkbox"/> Section32oftheUSHAof1937(effective10/1/9 9)
3.Applicationstatus:(selectone) <input type="checkbox"/> Approved;includedinthePHA’sHomeownershipPlan/Program <input type="checkbox"/> Submitted,pendingapproval <input type="checkbox"/> Plannedapplication
4.DateHomeownershipPlan/Programapproved,s ubmitted,orplannedforsubmission: (DD/MM/YYYY)
5. Numberofunitsaffected: 6.Coverageofaction:(selectone) <input type="checkbox"/> Partofthedevelopment <input type="checkbox"/> Totaldevelopment

B. Section 8 Tenant Based Assistance

1. ☐ Yes ☒ No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982? (If "No", skip to component 12; if "yes", describe each program using the table below (copy and complete questions for each program identified), unless the PHA is eligible to complete a streamlined submission due to high performer status. **High performing PHAs** may skip to component 12.)

2. Program Description:

a. Size of Program

☐ Yes ☐ No: Will the PHA limit the number of families participating in the section 8 homeownership option?

If the answer to the question above was yes, which statement best describes the number of participants? (select one)

- ☐ 25 or fewer participants
- ☐ 26- 50 participants
- ☐ 51 to 100 participants
- ☐ more than 100 participants

b. PHA -established eligibility criteria

☐ Yes ☐ No: Will the PHA's program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria?

If yes, list criteria below:

12. PHA Community Service and Self-Sufficiency Programs

[24 CFR Part 903.79(l)]

Exemptions from Component 12: High performing and small PHAs are not required to complete this component. Section 8 - Only PHAs are not required to complete sub-component C.

A. PHA Coordination with the Welfare (TANF) Agency

1. Cooperative agreements:

☐ Yes ☒ No: Has the PHA entered into a cooperative agreement with the TANF Agency, to share information and/or target supportive services (as contemplated by section 12(d)(7) of the Housing Act of 1937)?

If yes, what was the date that agreement was signed? DD/MM/YY

2. Other coordination efforts between the PHA and TANF Agency (select all that apply)

☒ Client referrals

- ☒ Information sharing regarding mutual clients (for rent determinations and otherwise)
- ☐ Coordinate the provision of specific social and self-sufficiency services and program to eligible families
- ☐ Jointly administer programs
- ☐ Partner to administer HUD Welfare-to-Work voucher program
- ☐ Joint administration of other demonstration program
- ☐ Other (describe)

B. Services and programs offered to residents and participants

(1) General

a. Self-Sufficiency Policies

Which, if any of the following discretionary policies will the PHA employ to enhance the economic and social self-sufficiency of assisted families in the following areas? (select all that apply)

- ☒ Public housing rent determination policies
- ☒ Public housing admissions policies
- ☐ Section 8 admissions policies
- ☐ Preference in admission to section 8 for certain public housing families
- ☒ Preferences for families working or engaging in training or education programs for non-housing programs operated or coordinated by the PHA
- ☐ Preference/eligibility for public housing homeownership option participation
- ☐ Preference/eligibility for section 8 homeownership option participation
- ☐ Other policies (list below)

b. Economic and Social self-sufficiency programs

- ☒ Yes ☐ No: Does the PHA coordinate, promote or provide any program to enhance the economic and social self-sufficiency of residents? (If "yes", complete the following table; if "no" skip to sub-component 2, Family Self-Sufficiency Programs. The position of the table may be altered to facilitate its use.)

Services and Programs				
Program Name & Description (including location, if appropriate)	Estimated Size	Allocation Method (waiting list/random selection/specific criteria/other)	Access (development office/ PHA main office/ other provider name)	Eligibility (public housing or section 8 participants or both)
Landscape/grounds maintenance	4	Specific criteria	Main office	Public housing
Health Information Office	1,455	Open to all	169 North Walnut	Open
Nutrition programs	50	Open to all	Main office	Open
Interior cleaning/custodial	4	Specific criteria	Main office	Public housing

(2) Family Self Sufficiency program/s

a. Participation Description

Family Self Sufficiency (FSS) Participation		
Program	Required Number of Participants (start of FY 2000 Estimate)	Actual Number of Participants (As of: DD/MM/YY)
Public Housing		
Section 8		

- b. ☐ Yes ☐ No: If the PHA is not maintaining the minimum program size required by HUD, does the most recent FSS Action Plan address the steps the PHA plans to take to achieve at least the minimum program size?
If no, list steps the PHA will take below:

C. Welfare Benefit Reductions

1. The PHA is complying with the statutory requirements of section 12(d) of the U.S.

Housing Act of 1937 (relating to the treatment of income changes resulting from welfare program requirements) by: (select all that apply)

- ☒ Adopting appropriate changes to the PHA's public housing rent determination policies and train staff to carry out those policies
- ☒ Informing residents of new policy on admission and reexamination
- ☐ Actively notifying residents of new policy at times in addition to admission and reexamination.
- ☐ Establishing or pursuing a cooperative agreement with all appropriate TANF agencies regarding the exchange of information and coordination of services
- ☒ Establishing a protocol for exchange of information with all appropriate TANF agencies
- ☐ Other: (list below)

13.PHASafetyandCrimePreventionMeasures

[24CFRPart903.79(m)]

ExemptionsfromComponent13:HighperformingandsmallPHAsnotparticipatinginPHDEPand
Section8OnlyPHAsmayskipcomponent15.HighPerformingandsmallPHAs thatare
participatinginPHDEP andaresubmittingaPHDEPPlanwiththisPHAPlanmayskip tosub
componentD. -

A.Needformeasurestoensurethesafetyofpublichousingresidents

1.Describetheneedformeasurestoensurethesafetyofpublichousingresidents

(selectallthatapply)

- ☐ High incidence of violent and/or drug -related crime in some or all of the PHA's developments
- ☒ High incidence of violent and/or drug -related crime in the area surrounding or adjacent to the PHA's developments
- ☒ Residents fearful for their safety and/or the safety of their children
- ☒ Observed lower -level crime, vandalism and/or graffiti
- ☒ People on waiting list unwilling to move into one or more developments due to perceived and/or actual levels of violent and/or drug -related crime
- ☐ Other (describe below)

2.What information or data did the PHA use to determine the need for PHA actions to improve safety of residents (select all that apply).

- ☒ Safety and security survey of residents
- ☒ Analysis of crime statistics over time for crimes committed "in and around" public housing authority
- ☐ Analysis of cost trends over time for repair of vandalism and removal of graffiti
- ☒ Resident reports
- ☐ PHA employee reports
- ☒ Police reports
- ☒ Demonstrable, quantifiable success with previous or ongoing anti crime/anti drug programs
- ☐ Other (describe below)

Resident Assessment and Satisfaction Survey

3.Which developments are most affected? (list below)

Clemens Homes -MI28P028001 and MI28P028002; Clemens Manor -MI28P028004

B. Crime and Drug Prevention activities the PHA has undertaken or plan to undertake in the next PHA fiscal year

1. List the crime prevention activities the PHA has undertaken or plan to undertake: (select all that apply)

- ☒ Contracting with outside and/or resident organizations for the provision of crime-and/or drug -prevention activities
- ☒ Crime Prevention Through Environmental Design
- ☒ Activities target ted to at -risky youth, adults, or seniors
- ☐ Volunteer Resident Patrol/Block Watchers Program
- ☐ Other (describe below)

2. Which developments are most affected? (list below)

Clemens Homes -MI28P028001 and MI28P028002; Clemens Manor -MI28P028004

C. Coordination between PHA and the police

1. Describe the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities: (select all that apply)

- ☒ Police involvement in development, implementation, and/or ongoing evaluation of drug -elimination plan
- ☒ Police provide crime data to housing authority staff for analysis and action
- ☒ Police have established a physical presence on housing authority property (e.g., community policing office, officer in residence)
- ☐ Police regularly testify in and otherwise support eviction cases
- ☐ Police regularly meet with the PHA management and residents
- ☒ Agreement between PHA and local law enforcement agency for provision of above-baseline law enforcement services
- ☐ Other activities (list below)

2. Which developments are most affected? (list below)

Clemens Homes -MI28P028001 and MI28P028002; Clemens Manor -MI28P028004

D. Additional information as required by PHDEP/PHDEP Plan

PHA eligible for FY 2002 PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

- ☒ Yes ☐ No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?
- ☐ Yes ☒ No: Has the PHA included the PHDEP Plan for FY 2002 in this PHA Plan?
- ☐ Yes ☒ No: This PHDEP Plan is an Attachment. (Attachment Filename)

14.RESERVEDFORPETPOLICY

[24CFRPart903.79(n)]

I. TheMountClemensHousingCommissionPetPolicy

In compliance with the Quality Housing and Work Responsibility Act of 1998 (Public Housing Reform Act), and 24 CFR part 960 final rule for pet ownership in public housing effective August 9, 2001 the Mount Clemens Housing Commission will permit residents of public housing to own and keep common household pets in their apartment. This policy sets forth the conditions and guidelines under which pets will be permitted. This policy is to be adhered to at all times.

Common Household pets are defined as follows :

Birds: Including canaries, parakeets, finch and other species that are normally kept caged birds of prey are not permitted.

Fish: Tanks or aquariums are not to exceed 20 gallons in capacity. Poisonous or dangerous fish are not permitted. Only one tank or aquarium is permitted per apartment.

Dogs: Are not to exceed the size of a standard poodle. All dogs must be neutered or spayed (male and female).

Cats: All cats must be neutered, spayed and declawed.

At no time will the Mount Clemens Housing Commission approve of exotic pets such as snakes, monkeys, rodents or any other dangerous animals.

II. Registration.

Every pet must be registered with the Mount Clemens Housing Commission's management prior to moving that pet into the building and updated annually thereafter.

Registration requires the following:

- A. A certificate signed by a licensed veterinarian, state and local authority stating that the pet has received all inoculations required by the state and local law.
- B. Proof of current license.
- C. Identification tags bearing the owner's name, address and phone number for both dogs and cats.
- D. Proof of neutering or spaying and/or declawing for both dogs and cats.
- E. Photograph not larger than 4x6 of pet or aquarium.
- F. The name, address and phone number of a responsible party that will care for the pet if the owner is incapacitated, expires or is otherwise unable to care for the pet.
- G. Fish. Size of tank or aquarium.

III. Density of Pets.

Only one four-legged warm-blooded pet will be allowed per apartment. Only two birds will be allowed per apartment and only one aquarium will be allowed per apartment. The Mount Clemens Housing Commission only will give final approval on types and density of pets.

IV. General Rules.

There resident agree to comply with the following rules imposed by the Mount Clemens Housing Commission:

- A. No pet shall be tied up anywhere on Housing Commission property and left unattended for any amount of time.
- B. Pet owners will be required to make arrangements for their pets in the event of vacation or hospitalization of tenant.
- C. Doghouses are not allowed on Housing Commission property.
- D. Pet owners must comply with all applicable state and local public health, animal control and anti-cruelty laws and regulations.

V. No Pet Areas

At no time will pets be allowed in any public areas such as common space, playground areas, laundry rooms, sitting rooms, etc. Pets shall be maintained in the resident's apartment and taken out in the areas specifically around the tenant's unit (front/back/side of resident's yard only). Tenant is responsible for pick up and disposal of animal waste.

VI. Pet Rule Violation and Pet Removal.

- A. If it is determined on the basis of objective facts supported by written statement that a pet owner has violated a rule governing the pet policy, the Mount Clemens Housing Commission shall serve a Notice of Pet Rule Violation on the pet owner. Serious or repeated violations may result in pet removal or termination of the pet owner's tenancy or both.
- B. If a pet poses a nuisance, such as excessive barking, noise or whining which disrupts the peaceful enjoyment of other residents, owners will remove the pet from the premises upon request of management within 48 hours. Nuisance complaints regarding pets are subject to immediate inspection.
- C. If a pet owner becomes unable, either through hospitalization or illness to care for the pet, and the person so designated to care for the pet in the pet owner's absence, refuses or is unable physically to care for the pet after a 24-hour limitation, the Mount Clemens Housing Commission can officially remove the pet.

VII. Damage Deposit. (Pet)

A pet damage deposit will be required for dogs and cats only. However, all pet owners must comply with registration rules for all other pets. The pet damage deposit will be paid in advance and is to be used to pay reasonable expenses directly attributable to the presence of the pet in the project including but not limited to the cost of repairs and replacements to and fumigation of the tenant's dwelling unit. The amount of the pet damage deposit will be the maximum amount allowable under the state law.

The deposit for a pet dog or cat shall be \$250.00. The deposit is refundable when pet or family vacates the unit, less any amount owed due to damages.

VIII. Exceptions.

Animals that are used to assist persons with disabilities are excluded from the requirements of this policy.

IV. Types of Pets.

Any animal deemed to be potentially harmful to the health and safety of others including attack or fight trained dogs are prohibited and are not allowed as pets:

Pitbull Terriers, Rotweilers, Dobermans, German Shepherds, Chows, Collies, Dalmatians, Boxers, any mixed breeds that include these and mixed with wolf. No pregnant animals allowed.

No animal shall exceed 25 pounds in weight projected to full adult size.

15. Civil Rights Certifications

[24CFR Part 903.79(o)]

Civil rights certifications are included in the PHA Plan Certification of Compliance with the PHA Plans and Related Regulations.

16. Fiscal Audit

[24CFR Part 903.79(p)]

1. ☒ Yes ☐ No: Is the PHA required to have an audit conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h))?
(If no, skip to component 17.)
2. ☒ Yes ☐ No: Was the most recent fiscal audit submitted to HUD?
3. ☒ Yes ☐ No: Were there any findings as the result of that audit?
4. ☒ Yes ☐ No: If there were any findings, do any remain unresolved?
If yes, how many unresolved findings remain? 1
5. ☒ Yes ☐ No: Have responses to any unresolved findings been submitted to HUD?
If not, when are they due (state below)?

17. PHA Asset Management

[24CFR Part 903.79(q)]

Exemptions from component 17: Section 8 Only PHAs are not required to complete this component. High performing and small PHAs are not required to complete this component.

1. ☐ Yes ☒ No: Is the PHA engaging in any activities that will contribute to the long-term asset management of its public housing stock, including how the Agency will plan for long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs that have **not** been addressed elsewhere in this PHA Plan?
2. What types of asset management activities will the PHA undertake? (select all that apply)
 - ☐ Not applicable
 - ☐ Private management
 - ☐ Development-based accounting
 - ☐ Comprehensive stock assessment

☐ Other:(listbelow)

3. ☐ Yes ☒ No: Has the PHA included descriptions of asset management activities in the **optional** Public Housing Asset Management Table?

18. Other Information

[24CFR Part 903.79(r)]

A. Resident Advisory Board Recommendations

1. ☒ Yes ☐ No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?
2. If yes, the comments are: (if comments were received, the PHA **MUST** select one)
- ☐ Attached at Attachment (File name)
- ☒ Provided below: **Residents asked for:**
- **Additional painting and floor replacement.**
 - **Bath tub and shower replacement**
 - **Include exhaust vent hood**
 - **Central air**
 - **Additional smoke detectors**

3. In what manner did the PHA address those comments? (select all that apply)
- ☐ Considered comments, but determined that no changes to the PHA Plan were necessary.

- ☒ The PHA changed portions of the PHA Plan in response to comments
- List changes below:

Painting and floor replacement were added in with other capital improvements

☐ Other:(listbelow)

B. Description of Election process for Residents on the PHA Board

1. ☐ Yes ☒ No: Does the PHA meet the exemption criteria provided in section 2(b)(2) of the U.S. Housing Act of 1937? (If no, continue to question 2; if yes, skip to sub-component C.)
2. ☐ Yes ☒ No: Was there a resident who serves on the PHA Board elected by the residents? (If yes, continue to question 3; if no, skip to sub-component C.)
3. Description of Resident Election Process **(N/A)**

a. Nomination of candidates for place on the ballot: (select all that apply)

- ☐ Candidates were nominated by resident and assisted family organizations
- ☐ Candidates could be nominated by any adult recipient of PHA assistance
- ☐ Self-nomination: Candidates registered with the PHA and requested a place on ballot
- ☐ Other:(describe)

b. Eligible candidates: (select one)

- ☐ Any recipient of PHA assistance

- ☐ Any head of household receiving PHA assistance
- ☐ Any adult recipient of PHA assistance
- ☐ Any adult member of a resident or assisted family organization
- ☐ Other (list)

c. Eligible voters: (select all that apply)

- ☐ All adult recipients of PHA assistance (public housing and section 8 tenant-based assistance)
- ☐ Representatives of all PHA residents and assisted family organizations
- ☐ Other (list)

C. Statement of Consistency with the Consolidated Plan

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).

1. Consolidated Plan jurisdiction: **Macomb County, Michigan**

2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)

- ☒ The PHA has based its statement of needs of families in the jurisdiction on the need expressed in the Consolidated Plan/s.
- ☐ The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
- ☒ The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
- ☒ Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below)
The Mount Clemens Housing Commission Needs Assessment
- ☐ Other: (list below)

4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)

Macomb County Consolidated Plan states

The Mount Clemens Housing Commission Needs Assessment.

This section identifies the number of households within the Macomb County urban area in need of housing assistance. The information comes directly from Macomb County's Consolidated Plan and from Mount Clemens Housing Commission records.

Housing Needs

According to information maintained by the Michigan State Housing Development Authority there are a total of 9,881 assisted housing units located within Macomb County. Sixty-one separate developments are scattered throughout 15 local communities. Of these developments, 26 have reserved 2,795 living units for elderly

citizens. This figure represents 28.2 percent of the total available assisted housing units.

Since 1991, the County of Macomb has estimated the housing assistance needs of low and moderate -income households and presented this data in the federally approved Comprehensive Housing Affordability Plan. The most recent and comprehensive available data on households by type, income and housing problems is contained in the 1990 Census. The accompanying presents the housing needs of the Macomb Urban County for Fiscal Year 1995 through Fiscal Year 1999.

Extremely Low -Income (0 -30% MFI)

According to the Census, there are 7,487 households or 8.3% of all households within the Urban County, whose income is 30% or less of the Median Family Income. Owners make up 48.6% of this grouping and renters constitute 51.4% of the total.

Renter-occupied households (3,851) are divided among the elderly, 1,754 (45.6%), small related, 1,041 (27.0%), large related, 158 (4.1%), and other households, 989 (23.3%). 72% of all renters who are classified as extremely low -income have cost burdens greater than 30%. There are 72% who have housing burdens greater than 50%.

Owner-occupied households (3,636) are divided among elderly, 2,097 (57.7%), and all others, 1,539 (42.3%). 81% of all owners have a reported cost burden greater than 30% of their incomes. 55% of the owner -occupied have housing burdens greater than 50%.

Low-Income (31 -50% MFI)

There are 8,210 households or 9.1% of all households with the Urban County whose income is from 31 -50% of the Median Family Income. Renters make up 35.7% of this grouping and Owners comprise the balance or 60.3% of the total.

Renter occupied households ((3,261) are divided among elderly, 1,153 (35.4%), small related, 1,084 (33.2%). 71% of this group declare problems with housing. 73% experience cost burdens greater than 30%. Only 30% (142% drop over the Extremely Low Income Category) have cost burdens greater than 50%.

Owner-occupied households (4,949) are made up of 3,025 elderly households (61.1%) and 1,924 in an All Others Category (38.9%). On average, 61% in this grouping experience housing problems and 60% are cost burdens greater than 30%. Only 20% declare a cost burden greater than 50%.

Moderate-Income (51 -80% MFI)

There are 14,359 households or 15.9 % of all Urban County households that earn incomes that are considered Moderate by federal standards. In this designation, renters make up 4,387 or 30.6% and owners constitute 9,972 households or 59.4%.

Moderate-income rentals have 1,782 small -related households, and 1,631 all other households, contrasted with 637 elderly and 337 large family. 33% of this group are cost burdened more than 30% and only 1% is burdened greater than 50%.

4,058 owner occupants have incomes that are moderate and 12% are cost burdened greater than 30%. Only 2% have cost burdens that exceed 50%. In the All Others Category, 5,914 households fall into designation and 39% are cost burdened greater than 30% and 6% have burdens, which exceed 50%.

Middle-Income (81 -95% MFI)

There are 8,025 households or 8.9% of all households within the Urban County that earn between 81 -95% of the Median Family Income. Renter total 2,039 or 25.4% and Owner total 5,986 or 74.6%.

Renter households in the middle -income category have 176 (8.6%), elderly, 826 (40.5%), small related 169 (8.3%), larger related and 868 all other households (42.6%). 10% of the elderly are experiencing rent cost burdens greater than 30%.

Owner-occupants with middle -income ranges have 1,265 elderly (21.1%) and 4,721 in an All Other Owners (78.9%). The elderly state that 9% are cost burdened greater than 30% of their income. In the All Other Category, this percentage increases to 21%.

Among the 90,136 households located in the Urban County, 22% have housing problems. This equates to 19,829 households. Of the 20,516 rental households, approximately 1 in every 3 units experiences housing problems. If you are an elderly residing in rental property, the chances of experiencing housing problems raise to 54%. Of the 69,620 owner -occupants, 18% (1 in 5) experience housing problems. For the elderly, 25% (1 in 4) is experiencing housing difficulties.

Meeting Housing Needs

Finally, we are required to state how we intend to address our community's housing needs to the extent practical. While we wish we could meet the needs in our jurisdiction, we are not optimistic about achieving this objective. The problem is that we lack the resources to fully address the housing needs here in this community. There are two steps we can take in order to meet additional housing needs. We can apply for additional grant opportunities made available by the U.S. Department of Housing and Urban Development. We may also be able to work with the Mount Clemens Housing Corporation to utilize bond refunding proceeds that organization accumulates under the provisions of the McKinney Act.

D. Other Information Required by HUD

Use this section to provide any additional information requested by HUD.

1. Deviations From and Modifications To the Agency Plan

The Agency Plan is a living document, which shall serve to guide Mount Clemens Housing Commission operations and resource management. In the event that circumstances or priorities necessitate actions, which would represent a substantial departure from the goals, objectives, timetables or policies as set forth in the plan, the Mount Clemens Housing Commission will invite resident review and input prior to taking actions that would implement such substantial changes.

Developments of subsequent Annual Plans shall be a vehicle through which updates and minor or routine modifications to the Agency Plan are made. On an annual basis MCHC will review its progress toward the achievement of its goals and objectives and the existing policies and procedures, adequately address the needs of its constituents, stakeholders and the agency. To the extent that those needs are not met by the elements of the existing agency Plan the subsequent Annual Plan shall be written to reflect changes to goals, objectives, policies and procedures to address those needs.

In the event that the elements of the subsequent annual plan represent a significant departure from those of the existing Agency Plan a significant amendment or modification to the Agency Plan will be undertaken. Under these circumstances, a full and participatory planning process will be used to obtain resident and stakeholder input. A draft of the substantially modified Agency Plan will be subject to the public review, comment and hearing process.

The MCHC will honor the current HUD definition of Substantial Deviation and Significant Amendment.

- Changes to rent or admissions policies or organization of the waiting list;
- Addition of non-emergency work items (items not included in the current Annual Statement or 5-Year Action Plan) or change in use of replacement reserve funds under the Capital Fund;
- And any change with regard to demolition or disposition, designation, home ownership programs or conversion activities.

2. Challenge Statement

The MCHC has a recent history of having the distinction of being a high performing agency for FY 1998 and 1999. Unfortunately, due to legal problems and personal problems faced by the past Executive Director, this agency could be described at best as dysfunctional from the time period of July 1999 through December 2000.

The current Executive Director was appointed on May 4, 2001. Below describes the condition of the Commission as of May 4, 2002.

- Agency without function Executive Directors since 7/1999
- Managers serving in dual capacity Manager/Acting Directors since 9/1999
- 7/2000-12/2000 no Administrator working on behalf of Housing Commission, Manager out on medical leave
- No Move -ins completed
- No unit inspections performed
- Routine maintenance function not meeting minimum HUD requirements for completion
- Bookkeeper/Accountant is vacant
- Loss of maintenance staff member
- Financial reporting not submitted in timely manner to HUD
- No tracking systems in place to ensure unit turnovers were being completed in a timely manner.
- Maintenance work orders not meeting HUD guidelines
- Tenant account receivables not monitored
- Yearly audit not performed

In summary this Commission was in dire straits. Staff turnover and morale was very low. During this period, the agency and its staff lacked consistent visionary leadership, guidance and direction.

Attachments

Use this section to provide any additional attachments referenced in the Plans

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1:

Summary

PHAName: Mount Clemens Housing Commission		Grant Type and Number Capital Fund Program: MI28PO2850100 Capital Fund Program Replacement Housing Factor Grant No:		Federal FY of Grant: 2000	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: ONE)					
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: December 31, 2001 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non - CFP Funds				
2	1406 Operations				
3	1408 Management Improvements	12,500	6,419	6,419	6,419
4	1410 Administration	47,000	49,427	47,000	38,427
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	45,500	37,362	17,362	17,362
8	1440 Site Acquisition				
9	1450 Site Improvement	336,782	267,868	622	622
10	1460 Dwelling Structures	105,000	186,706	178,226	120,322
11	1465.1 Dwelling Equipment — Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2 - 19)	546,782	546,782	249,629	183,152
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security				
24	Amount of line 20 Related to Energy Conservation Measures				

AnnualStatement/PerformanceandEvaluationReport

CapitalFundProgramandCapitalFundProgram ReplacementHousingFactor(CFP/CFPRHF)

PartII:SupportingPages

PHAName: MountClemensHousingCommission		GrantTypeandNumber CapitalFundProgram#: MI28P02850100 CapitalFundProgram ReplacementHousingFactor#:			FederalFYofGrant: 2000Asof12/31/01			
Development Number/Name HA-Wide Activities	GeneralDescription ofMajorWorkCategories	Development Account Number	Quantity	TotalEstimatedCost		TotalActualCost		Statusof Proposed
				Original	Revised	Funds Obligated	Funds Expended	
HAWide	<u>MANAGEMENTIMPROVEMENTS:</u>	1408		5,000	0	0	0	
	A.Commissioner&StaffTraining			7,500	0	0	0	
	B.ResidentEconomicDev.Initiatives							
	C.Securityguardservices(needed whilealarmsystemwasbeing replacedinMI28 -3			0	6,419	6,419	6,419	
	SUBTOTAL			12,500	6,419	6,419	6,419	
HAWide	<u>ADMINISTRATION</u>	1410						
	A.ModernizationCo -Ordinator			35,000	37,427	35,000	26,427	
	B.ExecutiveDirector			5,000	5,000	5,000	5,000	
	C.HousingManager			2,000	2,000	2,000	2,000	
	D.Bookkeeper			2,500	2,500	2,500	2,500	
	E.Secretary			2,500	2,500	2,500	2,500	
	SUBTOTAL			47,000	49,427	47,000	38,427	
HAWide	<u>FEESANDCOST</u>	1430						
	A.A&EFeesandCosts			41,000	36,362	17,362	17,362	
	B.Grantpreparation			4,500	0	0	0	
	SUBTOTAL			45,500	36,362	17,362	17,362	

Annual Statement/Performance and Evaluation Report**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)****Part II: Supporting Pages**

PHAName: Mount Clemens Housing Commission		Grant Type and Number Capital Fund Program#: MI28P02850100 Capital Fund Program Replacement Housing Factor#:				Federal FY of Grant: 2000 As of 12/31/01		
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed
				Original	Revised	Funds Obligated	Funds Expended	
MI28-1 Clemens Homes	<u>SITE IMPROVEMENTS</u> Continue Site Improvements plan as follows: Select tree removal and site clearing, Demolish drying yards; replace concrete pads and construct new storage sheds. Replaced damaged front stoops. Include landscaping allowance for each unit.	1450		<u>112,282</u>	<u>0</u>	<u>0</u>	<u>0</u>	
	SUBTOTAL	1450		112,282	0	0	0	
MI28-2 Clemens Homes	<u>SITE IMPROVEMENTS</u> Continue Site improvement network as follows: select tree removal and site clearing, demolish drying yards, replace concrete flatwork; replaced damaged front stoops and construct storage sheds. Include landscape allowance for each unit.	1450		<u>224,500</u>	<u>267,868</u>	<u>622</u>	<u>622</u>	
	SUBTOTAL	1450		224,500	267,868	622	622	

AnnualStatement/PerformanceandEvaluationReport

CapitalFundProgramandCapitalFundProgram ReplacementHousingFactor(CFP/CFPRHF)

PartII:SupportingPages

PHAName: MountClemensHousingCommission		GrantTypeandNumber CapitalFundProgram#: MI28P02850100 CapitalFundProgram ReplacementHousingFactor#:			FederalFYofGrant: 2000Asof12/31/01			
Development Number/Name HA-Wide Activities	GeneralDescription ofMajorWorkCategories	Development Account Number	Quantity	TotalEstimatedCost		TotalActualCost		Statusof Proposed
				Original	Revised	Funds Obligated	Funds Expended	
MI28-3Clemens Towers	<u>DWELLINGSTRUCTURES:</u> A.Alarmpanelreplacementand associatedelectricalwork.			<u>75,000</u>	<u>186,706</u>	<u>176,226</u>	<u>120,322</u>	
	SUBTOTAL	1460		75,000	186,706	176,226	120,322	
MI28-4Clemens Manor	A.Replaceapartmentcarpetingwith basecoverasneeded.			<u>30,000</u>	<u>0</u>	<u>0</u>	<u>0</u>	
	SUBTOTAL	1460		30,000	0	0	0	
	GRANDTOTAL			546,782	546,782	249,629	183,152	

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: Mount Clemens Housing Commission			Grant Type and Number Capital Fund Program #: MI28P02850100 Capital Fund Program Replacement Housing Factor #:				Federal FY of Grant: 2000
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
	03/31/02			9/30/03			

Annual Statement/Performance and Evaluation Report**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1:****Summary**

PHA Name: Mount Clemens Housing Commission	Grant Type and Number Capital Fund Program: MI28PO28707 Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: 1999
---	---	--

☐ Original Annual Statement ☐ Reserve for Disasters/Emergencies ☒ Revised Annual Statement (revision no: ONE)
☒ Performance and Evaluation Report for Period Ending: December 31, 2001 ☐ Final Performance and Evaluation Report

Line #	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non-CFP Funds				
2	1406 Operations	0	0	0	0
3	1408 Management Improvements	12,500	0	0	0
4	1410 Administration	47,000	58,007	58,007	58,007
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	43,000	25,211	25,211	25,211
8	1440 Site Acquisition				
9	1450 Site Improvement	453,666	472,948	472,948	471,948
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment — Nonexpendable				
12	1470 Non Dwelling Structures				
13	1475 Non Dwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2-19)	556,166	556,166	556,166	555,166
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary				
PHA Name: Mount Clemens Housing Commission		Grant Type and Number Capital Fund Program: MI28PO28707 Capital Fund Program Replacement Housing Factor Grant No:		Federal FY of Grant: 1999
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: ONE) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: December 31, 2001 <input type="checkbox"/> Final Performance and Evaluation Report				
Line #	Summary by Development Account	Total Estimated Cost		Total Actual Cost
24	Amount of line 20 Related to Energy Conservation Measures			

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: Mount Clemens Housing Commission		Grant Type and Number Capital Fund Program #: MI28PO28707 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 1999			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
HA Wide	<u>MANAGEMENT IMPROVEMENTS:</u>	1408						
	A. Commissioner & Staff training			5,000	0	0	0	
	B. Resident Economic Dev Initiatives			<u>7,500</u>	<u>0</u>	<u>0</u>	<u>0</u>	
	SUBTOTAL			12,500	0	0	0	

Annual Statement/Performance and Evaluation Report**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)****Part II: Supporting Pages**

PHAName: Mount Clemens Housing Commission		Grant Type and Number Capital Fund Program#: MI28PO28707 Capital Fund Program Replacement Housing Factor#:				Federal FY of Grant: 1999		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
HA Wide	<u>ADMINISTRATION</u> A. Modernization Coordinator B. Executive Director C. Bookkeeper D. Secretary SUBTOTAL	1410		35,000 6,000 3,000 <u>3,000</u> 47,000	46,007 6,000 3,000 <u>3,000</u> 58,007	46,007 6,000 3,000 <u>3,000</u> 58,007	46,007 6,000 3,000 <u>3,000</u> 58,007	
HA Wide	<u>FEES & COSTS</u> A. A & E Fees and cost B. Grant preparation SUBTOTAL	1430		40,000 <u>3,000</u> 43,000	22,711 <u>2,500</u> 25,211	22,711 <u>2,500</u> 25,211	22,711 <u>2,500</u> 25,211	

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHAName: Mount Clemens Housing Commission		Grant Type and Number Capital Fund Program#: MI28PO28707 Capital Fund Program Replacement Housing Factor#:				Federal FY of Grant: 1999		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
MI28-2 Clemens Homes	<u>SITE IMPROVEMENTS:</u> Continue comprehensive site improvement work as follows: Replace existing concrete sidewalk/paths, paving/patios; Concrete & curbing removal & replacement; Remove block wall in drying yards; Install clotheslines; Install dumpsters screen walls & pads; Asphalt resurfacing; New asphalt paving; Install "Tot-Lots" at select complexes; Select tree removal & site clearing; Demolish existing drying yard and replace concrete pad & construct new storage units; Remove & Replace sanitary lead to mains; Replace damaged front stoops; Landscaping allowance per unit; Site Utilities – electrical; Demolish overhead system; remove masts/patch roofs; new poles; New UG feeder to existing meter boxes; Site pedestrian lighting & patch repair.	1450		453,666	472,948	472,198	471,948	
	<u>GRAND TOTAL</u>			<u>556,166</u>	<u>556,166</u>	<u>556,166</u>	<u>555,166</u>	

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: Mount Clemens Housing Commission		Grant Type and Number Capital Fund Program #: MI28PO28707 Capital Fund Program Replacement Housing Factor #:				Federal FY of Grant: 1999 As of 12/31/01 Rev. #1	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
PHA Wide	03/03/01			09/30/02			
MI28-1 Clemens Homes	03/31/01			09/30/02			
MI28-2 Clemens Homes	03/31/01			09/30/02			
MI28-3 Clemens Towers	03/31/01			09/30/02			
MI28-4 Clemens Manor	03/31/01			09/30/02			

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: Mount Clemens Housing Commission		Grant Type and Number Capital Fund Program: MI28PO2850101 Capital Fund Program Replacement Housing Factor Grant No:			Federal FY of Grant: 2001
<input checked="" type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: December 31, 2001				<input type="checkbox"/> Final Performance and Evaluation Report	
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements	12,500		0	0
4	1410 Administration	50,000		50,000	6,000
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	38,000		0	0
8	1440 Site Acquisition				
9	1450 Site Improvement	310,000		0	0
10	1460 Dwelling Structures	144,000		0	0
11	1465.1 Dwelling Equipment — Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	3,368		0	0
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2-19)	557,868		50,000	6,000
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary				
PHA Name: Mount Clemens Housing Commission		Grant Type and Number Capital Fund Program: MI28PO2850101 Capital Fund Program Replacement Housing Factor: rGrantNo:		Federal FY of Grant: 2001
<input checked="" type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: December 31, 2001				<input type="checkbox"/> Final Performance and Evaluation Report
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost
24	Amount of line 20 Related to Energy Conservation Measures			

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: Mount Clemens Housing Commission		Grant Type and Number Capital Fund Program #: MI28PO2850101 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 2001 as of 12/31/01			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
HA Wide	<u>MANAGEMENT IMPROVEMENTS:</u> A. Commissioner & Staff Training B. Resident Economic Dev Initiatives <div style="text-align: right;">SUBTOTAL</div>			5,000 <u>7,500</u>				
		1408		12,500		0	0	

AnnualStatement/PerformanceandEvaluationReport
CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF)
PartII:SupportingPages

PHAName: MountClemensHousingCommission		GrantTypeandNumber CapitalFund Program#: MI28P02850101 CapitalFundProgram ReplacementHousingFactor#:			FederalFYofGrant: 2001asof12/31/01			
Development Number Name/HA-Wide Activities HAWide	GeneralDescriptionofMajorWork Categories	Dev.AcctNo.	Quantity	TotalEstimatedCost		TotalActual Cost		Statusof Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
	<u>ADMINISTRATION</u>							
	A.ModernizationCoordinator			38,000		38,000		
	B.Portionofstaffsalaries			<u>12,000</u>		<u>12,000</u>	<u>6,000</u>	
	SUBTOTAL	1410		50,000		50,000	6,000	
HAWide	<u>FEES&COSTS</u>							
	A.A&EFeesandcost			<u>38,000</u>				
	SUBTOTAL	1430		38,000		0	0	
HAWide	<u>NON-DWELLINGEQUIPMENT</u>							
	A.Equipment			<u>3,368</u>				
	SUBTOTAL	1475		3,368		0	0	
MI28-1 ClemensHomes	<u>SITEIMPROVEMENT</u>							
	A.Continuesiteworkbeguninprevious phase			<u>10,000</u>				
	SUBTOTAL	1450		10,000		0	0	

Annual Statement/Performance and Evaluation Report**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)****Part II: Supporting Pages**

PHAName: MountClemensHousingCommission		GrantTypeandNumber CapitalFund Program#: MI28P02850101 CapitalFundProgram ReplacementHousingFactor#:			FederalFYofGrant: 2001asof12/31/01			
Development Number Name/HA-Wide Activities	GeneralDescriptionofMajorWork Categories	Dev.AcctNo.	Quantity	TotalEstimatedCost		TotalActual Cost		Statusof Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
MI28-1 ClemensHomes	<u>DWELLINGSTRUCTURES</u>							
	A.Beginreplacementofvinyltilefloors			6,666				
	B.Initialconstructionofcantilevered closets			6,667				
	C.Beginre -roofingofselectedbuildings			<u>6,667</u>				
	SUBTOTAL	1460		20,000		0	0	
MI28-2	<u>SITEIMPROVEMENT</u>							
	A.Continuesiteworkbeguninprevious phase			<u>300,000</u>				
	SUBTOTAL	1450		300,000		0	0	
MI28-2	<u>DWELLINGSTRUCTURES</u>							
	A.Beginreplacementofvinyltilefloors			16,666				
	B.Initialconstructiono fcantilevered closets			16,667				
	C.Beginre -roofingofselectedbuildings			<u>16,667</u>				
	SUBTOTAL	1460		50,000		0	0	

Annual Statement/Performance and Evaluation Report**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)****Part II: Supporting Pages**

PHAName: MountClemensHousingCommission		GrantTypeandNumber CapitalFund Program#: MI28P02850101 CapitalFundProgram ReplacementHousingFactor#:			FederalFYofGrant: 2001asof12/31/01			
Development Number Name/HA-Wide Activities	GeneralDescriptionofMajorWork Categories	Dev.AcctNo.	Quantity	TotalEstimatedCost		TotalActual Cost		Statusof Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
MI28-3	<u>DWELLINGSTRUCTURES</u>							
	A.Replaceapartmentcarpetinginselect units.			11,666				
	B.Reglazing/replacementoffaulty windows			11,667				
	C.Convert1unittomeethandicapped accessibilitystandards			<u>11,667</u>				
	SUBTOTAL	1460		35,000		0	0	
MI28-4	<u>DWELLINGSTRUCTURES</u>							
	A.Replacecarpetinginselectunitsand commonareas			19,500				
	B.Improveare ntrancesto3buildings			<u>19,500</u>				
	SUBTOTAL	1460		39,000		0	0	
	GRANDTOTAL			557,868		50,000	6,000	

Annual Statement/Performance and Evaluation Report**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)****Part III: Implementation Schedule**

PHAName: Mount Clemens Housing Commission		Grant Type and Number Capital Fund Program#: MI28P02850101 Capital Fund Program Replacement Housing Factor#:					Federal FY of Grant: 2001 AS OF 12/31/01
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
	03/31/03			09/30/05			

Annual Statement/Performance and Evaluation Report**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1:****Summary**

PHA Name: Mount Clemens Housing Commission		Grant Type and Number Capital Fund Program: MI28PO2850102 Capital Fund Program Replacement Housing Factor Grant No:			Federal FY of Grant: 2002	
<input checked="" type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies			<input checked="" type="checkbox"/> Revised Annual Statement (revision no:)	
<input type="checkbox"/> Performance and Evaluation Report for Period Ending: December 31, 2001		<input type="checkbox"/> Final Performance and Evaluation Report				
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost		
		Original	Revised	Obligated	Expended	
1	Total Non-CFP Funds					
2	1406 Operations					
3	1408 Management Improvements		12,500	0	0	
4	1410 Administration		47,000	0	0	
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs		48,000	0	0	
8	1440 Site Acquisition					
9	1450 Site Improvement		25,000	0	0	
10	1460 Dwelling Structures		380,000	0	0	
11	1465.1 Dwelling Equipment — Nonexpendable					
12	1470 Non-dwelling Structures					
13	1475 Non-dwelling Equipment					
14	1485 Demolition					
15	1490 Replacement Reserve					
16	1492 Moving to Work Demonstration					
17	1495.1 Relocation Costs		3,536	0	0	
18	1498 Mod Used for Development					
19	1502 Contingency		20,000	0	0	
20	Amount of Annual Grant (sum of lines 2-19)		536,036	0	0	
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504 Compliance					
23	Amount of line 20 Related to Security					

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary				
PHA Name: Mount Clemens Housing Commission		Grant Type and Number Capital Fund Program: MI28PO2850102 Capital Fund Program Replacement Housing Factor Grant No:		Federal FY of Grant: 2002
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: December 31, 2001		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input checked="" type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Final Performance and Evaluation Report
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost
24	Amount of line 20 Related to Energy Conservation Measures			

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: Mount Clemens Housing Commission		Grant Type and Number Capital Fund Program #: MI28PO2850102 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 2002			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
HAWide	<u>MANAGEMENT IMPROVEMENTS:</u> A. Commissioner & Staff Training B. Resident Economic Dev Initiatives	1408			12,500			
HAWide	<u>ADMINISTRATION</u> A. Modernization Coordinator B. Portion of staff salaries	1410			47,000			

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHAName: MountClemensHousingCommission		GrantTypeandNumber CapitalFundP rogram#: MI28P02850102 CapitalFundProgram ReplacementHousingFactor#:				FederalFYofGrant: 2002		
Development Number Name/HA-Wide Activities	GeneralDescriptionofMajorWork Categories	Dev.AcctNo.	Quantity	TotalEstimatedCost		TotalActualCost		Statusof Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
HAWide	<u>FEES&COSTS</u>	1430			48,000			
MI28-3 ClemensTower	A.A&EFeesandcost <u>SITEIMPROVEMENT</u> A.FenceConstruction	1450			25,000			
MI28-1 ClemensHomes	<u>DWELLINGSTRUCTU RES</u> A.Paintunitinteriors –20units@ \$2000perunit B.Re -roof5fourplexbuildings@ \$17,000perbldg. C.Beginfurnacereplacement –40units @\$2500/perunit	1460			40,000 85,000 <u>100,000</u>			
	SUBTOTAL				225,000			
MI28-2 ClemensHomes	<u>DWELLINGSTRUCTURES</u> A.Paintunitinteriors –12units@ \$2000/perunit B.Re -roof3fourplexbldgs@ \$17,000/perbldg.	1460			24,000 <u>51,000</u>			
	SUBTOTAL				75,000			

AnnualStatement/PerformanceandEvaluationReport**CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF)****PartII:SupportingPages**

PHAName: MountClemensHousingCommission		GrantTypeandNumber CapitalFundP rogram#: MI28P02850102 CapitalFundProgram ReplacementHousingFactor#:			FederalFYofGrant: 2002			
Development Number Name/HA-Wide Activities MI28-3	GeneralDescriptionofMajorWork Categories <u>DWELLINGSTRUCTURES</u> A.Paintunitinteriors –20units@ \$1500/perunit B.Begins electedwindow repair/replacement SUBTOTAL	Dev.AcctNo. 1460	Quantity	TotalEstimatedCost		TotalActualCost		Statusof Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	

AnnualSta tement/PerformanceandEvaluationReport**CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF)****PartIII:ImplementationSchedule**

PHAName: MountClemensHousing Commission			GrantTypeandNumber CapitalFundProgram#: MI28P02850102 CapitalFundProgramReplacementHousingFactor#:			FederalFYofGrant: 2002	
DevelopmentNumber Name/HA-Wide Activities	AllFundObligated (QuartEndingDate)			AllFundsExpended (QuarterEndingDate)			ReasonsforRevisedTargetDates
	Original	Revised	Actual	Original	Revised	Actual	
PHAWide		03/31/04			09/30/06		
MI38-1		03/31/04			09/30/06		
MI28-2		03/31/04			09/30/06		
MI28-3		03/31/04			09/30/06		
MI28-4		03/31/04			09/30/06		